

Absentee Application and Certificate

Fraudulently or Falsely completing this form is a Class I felony under Chapter 163 of the N.C. General Statutes

The following people are PROHIBITED from signing the Witnesses' Certification:

For all voters: a candidate, UNLESS the candidate is the voter's near relative;

For voters who are patients or residents of a hospital, clinic, nursing home, or adult care home: (1) an owner, manager, director, or employee of that facility; (2) an individual who holds any federal, State, or local elective office; and (3) an individual who holds office in a State, congressional district, county or precinct political party or organization; or who is a campaign manager or treasurer for any candidate or political party.

OPHER DELYNN EASON

BOBRO NC 28320

BLADEN COUNTY



Ballot: 0001
ISTOPHER DELYNN EASON

NTD: P202/P202 Muni: 20
5/2016 - GENERAL

Primary Request or Runoff Request: If a Second Primary (or Runoff Election) is called, an absentee application and ballot be issued to me 5 ms. (Check the box to receive eligible ballots.)

Request for Illness/Disability: If used or expected illness or disability, I request that in be a request for absentee ballots for any other re held this calendar year in which I am eligible to check the box to receive eligible ballots.)

If applicable

Application and ballot should be mailed

Voter's Certification (Required)

I am applying for an absentee ballot. I am a duly qualified voter, registered as an affiliate of the political party indicated on this application. All information represented on this application is correct. I am entitled to vote in this election. If I am an Unaffiliated voter voting in a primary election, I am voting in the party primary indicated on the attached label. If the party indicated is (UNA), I am voting a nonpartisan ballot.

I further certify that I marked the enclosed ballot (or it was marked for me according to my instructions) in the presence of:

☒ two (2) witnesses who are at least 18 years of age and who are not disqualified by law to witness the casting of my absentee ballot (the witnesses must complete the Option 1 of the Witnesses' Certification)

☐ a Notary Public OR
I complete Option 2 of the Witnesses'

28-18
Date

Name Correction (if applicable)

Voter Assistant Certification (If applicable)

I certify that: The voter requested my assistance. I assisted the Voter by marking the ballot only according to the Voter's instruction; and/or I assisted the Voter in completing the Absentee Application and Certificate. I assisted the Voter only in the Voter's presence. I am the Voter's near relative or verifiable legal guardian, or I am providing assistance because a near relative or legal guardian is unavailable to assist the voter.

Name of Assistant

Address of Assistant

X

Signature of Assistant

Date

Witnesses' Certification

Option 1: Two (2) Witnesses
(Required Unless a Notary Public is the Witness)

I certify that: I am at least 18 years old. I am not disqualified from witnessing this ballot as described in the WARNING on the flap of this envelope. The Voter marked the enclosed ballot in my presence, or caused it to be marked in the Voter's presence according to his/her instruction. The Voter signed this Absentee Application and Certificate, or caused it to be signed. I inspected the secrecy of the ballot and the Voter's privacy, unless I assisted the Voter at his/her request (complete Voter Assistant Certification section).

Witness #1	Witness #2
<i>Christopher Eason</i>	<i>Kevin Spurling</i>
Street Address (Required)	Street Address (Required)
<i>Bladenboro NC 28320</i>	<i>Bladenboro NC 28320</i>
City, State and Zip (Required)	City, State and Zip (Required)
<i>9-28-18</i>	<i>9-28-18</i>
Date	Date

Option 2: Notary Public as Witness
(Required Unless Two Witnesses Provided)

I certify that, on the _____ day of _____, 20____, the Voter, _____, personally appeared before me, was positively identified, and in my presence, the Voter marked the enclosed ballot, or caused it to be marked in the Voter's presence according to his/her instruction. The Voter signed this Absentee Application and Certificate, or caused it to be signed. I am at least 18 years old. I am not disqualified from witnessing this ballot as described in the WARNING on the flap of this envelope. I inspected the secrecy of the ballot and the privacy of the Voter, unless I assisted the Voter at his/her request (complete Voter Assistant Certification section).

NOTE: A notary must charge, apply for witnessing and affix a notarial seal to an absentee ballot application or certificate.

STATE OF _____	Notary Public	Commission Expiration Date _____
COUNTY OF _____		